

## **Code Correlations: Inpatient Revenue Codes (Formerly Accommodation Codes)**

Medi-Cal has developed a service code set correlation table for provider use to begin to prepare for business and billing operation changes, software and practice management system modification and vendor or clearinghouse use. Additional policy, billing instructions and provider manual replacement pages will be included in future *Medi-Cal Updates*. These correlation tables are separated by claim type and billing media (paper, current proprietary and non-standard formats as well as the HIPAA standard formats). These values are not to be used for billing purposes for dates of service prior to September 22, 2003. The correlation tables apply to both paper and electronic claims submission, with each billing medium and table being represented separately. The table for this code set applies to the following billing media:

- ❖ Inpatient and Outpatient Paper Claims (UB-92)
- ❖ Version 4 Flat File
- ❖ CMC Proprietary (CMC 03)
- ❖ ANSI ASC X12N 837 version 3041
- ❖ ANSI ASC X12N 837I version 4010A1

### Modifications for billing:

- Paper: Field Locator (FL) 42 – Revenue Code
- Version 4 Flat File: Record Type 50, Field 4 – Accommodation Revenue Code
- CMC Proprietary: CHFC Code
- ANSI ASC X12 837 version 3041: Loop 2400, SV201 – Revenue Code
- ANSI ASC X12N 837I version 4010A1: Loop 2400, SV201 – Revenue Code

### Billing information:

- Claims currently required to be billed on paper are still required to be billed on paper at this time. Some codes referenced in the correlation may be billed on paper only. Please reference the appropriate Medi-Cal Provider Manual for specific billing instructions.
- The following correlation shows the national value for this field to be used when completing a claim with a beginning date of service on or after September 22, 2003.
- When completing a claim with a beginning date of service before September 22, 2003, the current Medi-Cal code must be used.
- Additional information on billing Inpatient revenue codes and new benefit changes will be provided in future *Medi-Cal Updates*.
- The following correlation is in Medi-Cal current code value order.

**ACCOMMODATION CODES/REVENUE CODES – INPATIENT**

<b>CURRENT CODE</b>	<b>DESCRIPTION</b>	<b>NATIONAL CODE</b>	<b>DESCRIPTION</b>
080	Other Acute Care Units	<b>119</b>	Room and Board, Private (Medical or General), Other
080	Other Acute Care Units	<b>129</b>	Room and Board, Semi-Private Two Beds (Medical or General), Other
080	Other Acute Care Units	<b>139</b>	Room and Board, Semi-Private Three or Four Beds, Other
080	Other Acute Care Units	<b>159</b>	Room and Board, Ward (Medical or General), Other
082	Psychiatric Emergency Room	<b>459</b>	Emergency Room, Other Emergency Room
083	Lung Transplant (Single Or Double), Intensive Care	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
084	Heart-Lung Transplant, Intensive Care	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
085	Nursery Acute Without Associated Delivery	<b>172</b>	Nursery, Newborn, Level II
086	Intensive Care, Heart Transplant	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
087	Intensive Care, Liver Transplant	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
088	Intensive Care, Bone Marrow Transplant	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
089	Intensive Care, Kidney Transplant	<b>201</b>	Intensive Care, Surgical, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
090	Lithotripsy	<b>790</b>	Lithotripsy, General Classification
091	Lithotripsy (Per Discharge Rate)	<b>790</b>	Lithotripsy, General Classification
092	Obstetrics Acute (Per Discharge Rate)	<b>112</b>	Room and Board, Private Medical or General), OB
092	Obstetrics Acute (Per Discharge Rate)	<b>122</b>	Room and Board, Semi-Private, 2 beds (Medical or General), OB
092	Obstetrics Acute (Per Discharge Rate)	<b>132</b>	Room and Board, Semi-Private, 3 or 4 Beds, OB
092	Obstetrics Acute (Per Discharge Rate)	<b>152</b>	Room and Board, Ward (Medical or General), OB
093	Other Physical Medicine	<b>949</b>	Other Therapeutic Services
094	Nursery Newborn, Ineligible Mother	<b>170</b>	Nursery, General Classification
095	Nursery Acute With Associated Delivery	<b>172</b>	Nursery, Newborn, Level II, <b>must be billed with the appropriate ICD-9-CM Volume 3 Procedure Code (which will be published in future <i>Medi-Cal Updates</i>).</b>
097	Psychiatric Acute (Adolescent and Child)	<b>114</b>	Room and Board, Private (Medical or General), Psychiatric
097	Psychiatric Acute (Adolescent And Child)	<b>124</b>	Room and Board, Semi-Private Two Bed (Medical or General), Psychiatric

**ACCOMMODATION CODES/REVENUE CODES – INPATIENT**

<b>CURRENT CODE</b>	<b>DESCRIPTION</b>	<b>NATIONAL CODE</b>	<b>DESCRIPTION</b>
097	Psychiatric Acute (Adolescent and Child)	134	Room and Board, Semi-Private, 3-4 Beds (Medical or General), Psychiatric
097	Psychiatric Acute (Adolescent and Child)	154	Room and Board, Ward (Medical or General), Psychiatric
098	Administrative Days	169	Room and Board, Other
099	Disproportionate Share (Sick Baby with Mother)	099	Non-Revenue Code (Disproportionate Share)
175	Nursery, Neonatal Intensive Care Unit	174	Nursery, Newborn Level IV
1080	Other Acute Care Units, Per Discharge Rate	119	Room and Board, Private (Medical or General), Other
1080	Other Acute Care Units, Per Discharge Rate	129	Room and Board, Semi-Private Two Beds (Medical or General), Other
1080	Other Acute Care Units, Per Discharge Rate	139	Room and Board, Semi-Private Three or Four Beds, Other
1080	Other Acute Care Units, Per Discharge Rate	159	Room and Board, Ward (Medical or General), Other
1085	Nursery Acute Without Associated Delivery	172	Nursery, Newborn, Level II
1094	Nursery Newborn, Ineligible Mother	170	Nursery, General Classification
1111	All Inclusive Per Discharge Rate, Room And Board, Private, Medical/Surgical/Gyn	111	Room and Board, Private (Medical or General), Medical/Surgical/Gyn
1112	All Inclusive Per Discharge Rate, Room And Board, Private, Ob	112	Room and Board, Private Medical or General), OB
1113	All Inclusive Per Discharge Rate, Room And Board, Private, Medical/Surgical/Gyn	113	Room and Board, Private (Medical or General), Pediatric
1117	All Inclusive Per Discharge Rate, Room And Board, Private, Oncology	117	Room and Board, Private (Medical or General), Oncology
1118	All Inclusive Per Discharge Rate, Room And Board, Private, Rehabilitation	118	Room and Board, Private (Medical or General), Rehabilitation
1121	All Inclusive Per Discharge Rate, Room And Board, Semi-Private Two Bed, Medical/Surgical/Gyn	121	Room and Board, Semi-Private Two Bed (Medical or General), Medical/Surgical/GYN
1122	All Inclusive Per Discharge Rate, Room And Board, Semi-Private Two Bed, Ob	122	Room and Board, Semi-Private, 2 beds (Medical or General), OB
1123	All Inclusive Per Discharge Rate, Room And Board, Semi-Private Two Bed, Pediatric	123	Room and Board, Semi-Private Two Bed (Medical or General), Pediatric
1127	All Inclusive Per Discharge Rate, Room And Board, Semi-Private Two Bed, Oncology	127	Room and Board, Semi-Private Two Bed (Medical or General), Oncology
1128	All Inclusive Per Discharge Rate, Room And Board Semi-Private Two Bed, Rehabilitation	128	Room and Board, Semi-Private Two Bed (Medical or General), Rehabilitation

**ACCOMMODATION CODES/REVENUE CODES – INPATIENT**

<b>CURRENT CODE</b>	<b>DESCRIPTION</b>	<b>NATIONAL CODE</b>	<b>DESCRIPTION</b>
1131	All Inclusive Per Discharge Rate, Room And Board, Semi-Private, three Or four Bed, Medical/Surgical/Gyn	<b>131</b>	Room and Board, Semi-Private three or four beds, Medical/Surgical/GYN
1132	All Inclusive Per Discharge Rate, Room And Board, Semi-Private 3 Or 4 Bed, Ob	<b>132</b>	Room and Board, Semi-Private, 3 or 4 Beds, OB
1133	All Inclusive Per Discharge Rate, Room And Board, Semi-Private three Or four Bed, Pediatric	<b>133</b>	Room and Board, Semi-Private three or four Bed, Pediatric
1137	All Inclusive Per Discharge Rate, Room And Board, Semi-Private three Or four Bed, Oncology	<b>137</b>	Room and Board, Semi-Private three or four Bed, Oncology
1138	All Inclusive Per Discharge Rate, Room And Board, Semi-Private three Or four Bed, Rehabilitation	<b>138</b>	Room and Board, Semi-Private three or four Bed, Rehabilitation
1151	All Inclusive Per Discharge Rate, Room And Board, Ward (Medical Or General), Medical/Surgical/Gyn	<b>151</b>	Room and Board, Ward (Medical and General), Medical/Surgical/GYN
1152	All Inclusive Per Discharge Rate, Room And Board, Ward (Medical Or General), Ob	<b>152</b>	Room and Board, Ward (Medical or General), OB
1153	All Inclusive Per Discharge Rate, Room And Board, Ward (Medical Or General), Pediatric	<b>153</b>	Room and Board, Ward (Medical or General), Pediatric
1157	All Inclusive Per Discharge Rate, Room and Board, Ward (Medical Or General), Oncology	<b>157</b>	Room and Board, Ward (Medical or General), Oncology
1158	All Inclusive Per Discharge Rate, Room And Board, Ward (Medical Or General), Rehabilitation	<b>158</b>	Room and Board, Ward (Medical or General), Rehabilitation
1171	All Inclusive Per Discharge Rate, Newborn Nursery	<b>171</b>	Nursery, Newborn Level I
1175	All Inclusive Per Discharge Rate, Nursery, Neonatal Intensive Care	<b>174</b>	Nursery, Newborn Level IV
1200	All Inclusive Per Discharge Rate, Intensive Care, General	<b>200</b>	Intensive Care, General Classification
1201	All Inclusive Per Discharge Rate, Intensive Care, Surgical	<b>201</b>	Intensive Care, Surgical
1202	All Inclusive Per Discharge Rate, Intensive Care, Medical	<b>202</b>	Intensive Care, Medical
1203	All Inclusive Per Discharge Rate, Intensive Care, Pediatric	<b>203</b>	Intensive Care, Pediatric
1204	All Inclusive Per Discharge Rate, Intensive Care, Psychiatric	<b>204</b>	Intensive Care, Psychiatric

ACCOMMODATION CODES/REVENUE CODES – INPATIENT			
CURRENT CODE	DESCRIPTION	NATIONAL CODE	DESCRIPTION
1206	All Inclusive Per Discharge Rate, Intensive Care, Post Icu	<b>206</b>	Intensive Care, Intermediate ICU
1207	All Inclusive Per Discharge Rate, Intensive Care, Burn Care In Licensed Burn Center Beds	<b>207</b>	Intensive Care, Burn Care
1208	All Inclusive Per Discharge Rate, Intensive Care, Trauma	<b>208</b>	Intensive Care, Trauma
1209	All Inclusive Per Discharge Rate, Intensive Care, Other	<b>209</b>	Intensive Care, Other
1210	All Inclusive Per Discharge Rate, Coronary Care, General	<b>210</b>	Coronary Care, General Classification
1211	All Inclusive Per Discharge Rate, Coronary Care, Myocardial Infarction	<b>211</b>	Coronary Care, Myocardial Infarction
1212	All Inclusive Per Discharge Rate, Coronary Care, Pulmonary Care	<b>212</b>	Coronary Care, Pulmonary Care
1214	All Inclusive Per Discharge Rate, Coronary Care, Post Ccu	<b>214</b>	Coronary Care, Intermediate CCU
1219	All Inclusive Per Discharge Rate, Coronary Care, Other	<b>219</b>	Coronary Care, Other

**Bolded** items denote changes to previously used values.